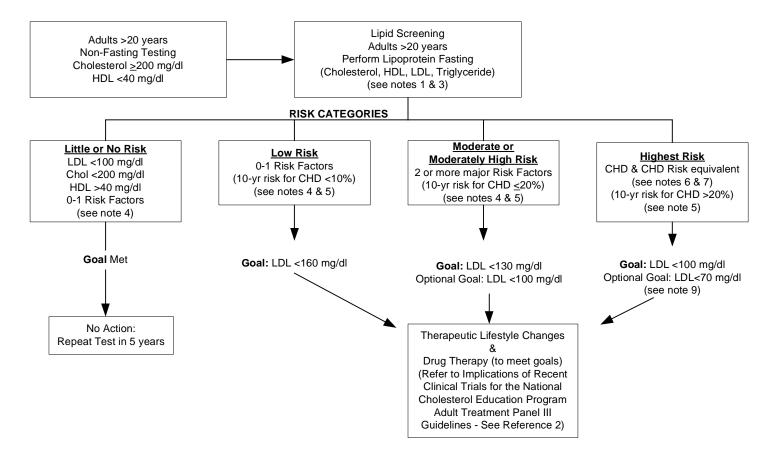
Lipid Screening Guidelines - Adult

Washington State Clinical Laboratory Advisory Council Originally Published March 1996 Reviewed/Revised: June 2002/January 2006

FOR EDUCATIONAL PURPOSES ONLY

The individual clinician is in the best position to determine which tests are most appropriate for a particular patient.



NOTES:

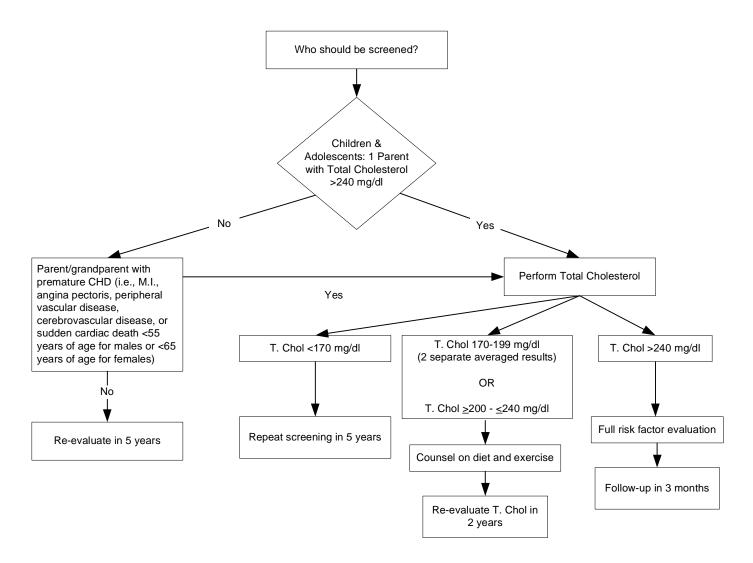
- 1. Before action is taken, average at least 2 measurements.
- 2. Eliminate secondary dyslipidemia before initiating lipid lowering therapies.
 - · Diabetes
 - · Hypothyroidism
 - · Obstructive liver disease
 - · Chronic renal failure
 - · Drugs that increase LDL cholesterol and decrease HDL cholesterol (progestins, anabolic steroids, and corticosteroids).
- 3. Consider other risk factors and emerging risk factors such as obesity, physical inactivity, atherogenic diet, Lipoprotein (a), homocysteine, prothrombotic and pro-inflammatory factors, impaired fasting glucose, and evidence of subclinical atherosclerotic diesease.
- 4. Major risk factors (exclusive of LDL cholesterol) that modify LDL goals:
 - · Cigarette Smoking
 - · Hypertension (blood pressure >140/90 mm Hg or on antihypertensive medication)
 - · Low HDL cholesterol (<40 mg/dl)
 - · Family history of premature CHD (CHD in male first-degree relative <55 yrs; CHD in female first-degree relative <65 yrs)
 - · Age (Men ≥45 yrs; women ≥55 yrs).
- 5. Electronic 10-year risk calculators are available at www.nhlbi.nih.gov/guidelines/cholesterol.
- 6. CHD includes history of myocardial infarction, unstable angina, stable angina, coronary artery procedures (angioplasty, or bypass surgery), or evidence of clinically significant myocardial ischemia.
- 7. CHD risk equivalents include clinical manifestations of noncoronary forms of atherosclerotic disease (peripheral arterial disease, abdominal aortic aneurysm, and carotid artery disease [transient ischemic attacks or stroke of carotid origin or >50% obstruction of a carotid artery]), diabetes, and 2+ risk factors with 10-year risk for hard CHD <20%.
- 8. For those without CHD, but with 2 or more risk factors and a 10-year risk between 10-20%, LDL <100 mg/dl is the optional goal.
- 9. Very high risk favors the optional LDL-C goal of <70 mg/dl, and in patients with high triglycerides, non-HDL-C <100 mg/dl.

Lipid Screening Guidelines - Children and Adolescent

Washington State Clinical Laboratory Advisory Council
Originally Published March 1996
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